

MULTIPLE DEFENDANT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

10/349664

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		2				
4	1	2				
5		1				
6		2				
7		9				
8		1				
9		1				
10		2				
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TOTAL IND.	2					
TOTAL DEP.		2				
TOTAL CLAIMS	13					

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						